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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's	Nakita First name S.	First name	
	license or passport).	Middle name	Middle name
Bring your picture identification to your		Molloy	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7637	

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Case number (if known)

Debtor 1 Nakita S. Molloy

		About Debtor 1:	Ab	out Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Bu	siness name(s)			
		EINs	EII	Ns			
5.	Where you live	3256 Winding Woods Drive	If C	Debtor 2 lives at a different address:			
		Powell, OH 43065  Number, Street, City, State & ZIP Code	Nu	imber, Street, City, State & ZIP Code			
		Delaware					
		County	Со	unty			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in	Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Nu	imber, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Ch	neck one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Nakita S. Molloy

ar	Tell the Court About	Your E	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under		Chapter 7						
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are pay	ring the fee	eck with the clerk's office in your local court for more deta yourself, you may pay with cash, cashier's check, or mor half, your attorney may pay with a credit card or check w	ney	
					stallments. If you cho		tion, sign and attach the Application for Individuals to Pa	У	
□ I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it							your income is less than 150% of the official poverty line in installments). If you choose this option, you must fill o	that	
<b>)</b> .	Have you filed for bankruptcy within the		0.						
	last 8 years?	ПΥ	es.						
			District		Whe	en	Case number		
			District		Whe	en	Case number		
			District		Whe	en	Case number		
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.						
			Debtor				Relationship to you		
			District		Whe	en	Case number, if known		
			Debtor				Relationship to you		
			District	-	Who	en	Case number, if known		
11.	Do you rent your residence?	■ N	o. Go to l	ine 12.					
	residence:	ПΥ	es. Has yo	ur landlord ob	tained an eviction jud	gment agair	nst you and do you want to stay in your residence?		
				No. Go to line	12.				
				Yes. Fill out <i>li</i> bankruptcy pe		ıt an Evictior	n Judgment Against You (Form 101A) and file it with this		

Case 2:16-bk-56500 Doc 1 Filed 10/06/16 Entered 10/06/16 12:52:31 Desc Main Document Page 4 of 65 Case number (if known) Debtor 1 Nakita S. Molloy Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business Yes A sole proprietorship is a business you operate as **Nakita Molloy** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. 3256 Winding Woods Drive If you have more than one Powell, OH 43065 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

#### Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Nakita S. Molloy Debtor 1 Nakita S. Molloy Case number (if known)

Part 5: E

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 65 Case number (if known) Debtor 1 Nakita S. Molloy Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nakita S. Molloy Signature of Debtor 2 Nakita S. Molloy Signature of Debtor 1 Executed on October 6, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Nakita S. Molloy Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Katharine Signature of Att	R. Granger orney for Debtor	Date	October 6, 2016 MM / DD / YYYY
Katharine R.	Granger		
Granger Law	Firm LLC		
3757 Attucks Powell, OH 4			
Number, Street, City			
Contact phone 6	14-389-4941	Email address	kgranger@granger-law-firm.com
0079143			
Bar number & State			

		1700.11111	THE PAUE OULDS	)
Fill in this infor	mation to identify your	case:		
Debtor 1	Nakita S. Molloy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	366,900.0
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	54,527.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	421,427.0
ar	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	420,055.0
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	19,970.6
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	40,695.43
	Your total liabilities	\$	480,721.08
Par	t 3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,056.5
j.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,606.5
<sup>2</sup> ar	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Debtor 1 Nakita S. Molloy

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 7,916.50 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	19,970.65
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	19,970.65

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ill in	this informat	tion to identify	your case and th					(),)				
Debtor	1	Nakita S. Mo	lloy									
<b>.</b>		First Name	Middle	Name		Last Na	me					
ebtor Spouse,	if filing)	First Name	Middle	Name		Last Na	me					
nited	States Bankı	ruptcy Court for	the: SOUTHER	N DISTI	RICT OF OH	IIO						
`ooo r	umbor											
ase 11	umber											Check if this is a amended filing
each of the format	edule category, sepa its best. Be a	s complete and a pace is needed, a	-	e. If two	married peop	le are filir	ng togethe	r, both are	equally resp	onsible for su	ıpplyi	ng correct
art 1:			uilding, Land, or Ot	her Real	Estate You O	wn or Ha	ve an Inter	est In				
Do yo	ou own or hav	e any legal or eq	uitable interest in a	ny resid	ence, building	g, land, or	similar pr	operty?				
□ Nc	o. Go to Part 2.											
_	s. Where is th											
		ng Woods Driv		What	is the proper Single-family	-	all that apply					or exemptions. Put
Sti	reet address, if av	vailable, or other desc	cription		Duplex or mu Condominiur	m or coope	erative					ms on Schedule D: cured by Property.
P	owell	<b>OH</b> State	43065-0000 ZIP Code		Manufacture Land Investment p		e home		Current va entire prop			rrent value of the rtion you own? \$366,900.0
					Timeshare Other				(such as fo	ee simple, ten		wnership interest by the entireties, o
				Who	has an interes Debtor 1 onl	•	roperty?	heck one	a life estat	e), if known.		
D	elaware				Debtor 2 only	•						
Co	ounty				Debtor 1 and	d Debtor 2	only		☐ Checl	c if this is con	nmun	ity property
					At least one information erty identifica	you wish	to add abo		(see in	structions)		31 11 3

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Debtor 1 **Nakita S. Molloy** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Infiniti Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **QX56** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the 27,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$44,475.00 \$44,475.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$44,475.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household Goods \$2,500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Nakita S. Molloy 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$500.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,000.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Pre-Paid Debit Card** \$250.00 17.1. **Huntington (Business checking)** \$1,100.00 17.2. PNC (Checking) \$2.00 17.3. 18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

☐ Yes...... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

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20	Government and corporate bonds and Negotiable instruments include personal Non-negotiable instruments are those you No  □ Yes. Give specific information about the	checks, cashiers' checks, promou cannot transfer to someone by	ssory notes, and mon		
	Issuer nam	e:			
21	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keo  No	gh, 401(k), 403(b), thrift savings	accounts, or other per	nsion or profit-sharing plans	5
	☐ Yes. List each account separately.  Type of accounts	int: Institution na	me:		
22	Security deposits and prepayments Your share of all unused deposits you he Examples: Agreements with landlords, p				or others
	■ No □ Yes	Institution na	me or individual:		
23	Annuities (A contract for a periodic payr ■ No	nent of money to you, either for l	fe or for a number of y	/ears)	
	☐ Yes Issuer name and d	escription.			
24	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 ■ No		ram, or under a qual	ified state tuition prograr	n.
	☐ Yes Institution name ar	d description. Separately file the	records of any interes	sts.11 U.S.C. § 521(c):	
25	<ul><li>Trusts, equitable or future interests in</li><li>No</li><li>☐ Yes. Give specific information about the</li></ul>	, ,	listed in line 1), and	rights or powers exercis	able for your benefit
26	Patents, copyrights, trademarks, trade Examples: Internet domain names, webs ■ No			s	
	$\square$ Yes. Give specific information about the	nem			
27	Licenses, franchises, and other gener Examples: Building permits, exclusive lid		holdings, liquor licens	es, professional licenses	
	☐ Yes. Give specific information about the	nem			
M	oney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax refunds owed to you ■ No				
	☐ Yes. Give specific information about th	em, including whether you alread	dy filed the returns and	d the tax years	
29	Family support  Examples: Past due or lump sum alimor  □ No	y, spousal support, child suppor	t, maintenance, divord	e settlement, property settl	ement
	■ Yes. Give specific information				
		Back Child Support			\$4,000.00

Official Form 106A/B Schedule A/B: Property page 4

	Case 2:16-bk-5	6500 I	Doc 1		16	Entered 10/06/16 12:52:3	1 Desc Main
Debtor	Nakita S. Molloy			Document	Pa	ge 14 of 65 Case number (if known)	
Exa ■ No	benefits; unpaid	isability insu loans you m	rance pay ade to sor	ments, disability ben neone else		sick pay, vacation pay, workers' compe	
31. Inte	rests in insurance polic	cies	ance: heal	th savings account (	(HSA)	; credit, homeowner's, or renter's insura	nce
□ No		, or me made	arioc, ricai	ar savings account (	(110/1)	, creak, nomeowner 3, or remer 3 moura	noc
■ Ye	es. Name the insurance of	company of e Company n		y and list its value.		Beneficiary:	Surrender or refund value:
		Term Life	with GT	L		_	\$0.00
If yo son ■ No	neone has died.	a living trust,				nce policy, or are currently entitled to rec	eive property because
Exa ■ No	amples: Accidents, emplo	yment dispu				made a demand for payment ue	
■ No	•	•	ims of eve	ery nature, includin	ng co	unterclaims of the debtor and rights t	o set off claims
■ No	financial assets you di o es. Give specific informa		dy list				
	ld the dollar value of all Part 4. Write that num					ntries for pages you have attached	\$5,352.00
Part 5:	Describe Any Business-R	elated Proper	ty You Ow	n or Have an Interest	In. Lis	st any real estate in Part 1.	
37. <b>Do y</b>	ou own or have any legal o	-	-			-	
■ Yes	s. Go to line 38.						
							Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ounts receivable or cor o es. Describe	mmissions y	you alread	dy earned			
Exa	•			modems, printers, c	copiers	s, fax machines, rugs, telephones, desks	, chairs, electronic devices
	La	p Top, Prir	nter				\$500.00

Debtor 1	Document Page 15 of 65  Nakita S. Molloy  Nakita S. Molloy	. Desc Main
	inery, fixtures, equipment, supplies you use in business, and tools of your trade	
io. Macii ■ No	inery, fixtures, equipment, supplies you use in business, and tools of your trade	
☐ Yes	s. Describe	
11. Inven	tory	
□ No		
Yes	s. Describe	
	Maka Ha Cumulias	\$4.200.00
	Make Up Supplies	\$1,200.00
	ests in partnerships or joint ventures	
■ No		
⊔ Yes	s. Give specific information about them	
_	omer lists, mailing lists, or other compilations	
No.		
∐ Do y	our lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	■ No	
	☐ Yes. Describe	
-	pusiness-related property you did not already list	
■ No	s. Give specific information	
00	. Gro specific fill different fill and	
	I the dollar value of all of your entries from Part 5, including any entries for pages you have attached Part 5. Write that number here	\$1,700.00
	L	
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. you own or have an interest in farmland, list it in Part 1.	
16. <b>Do y</b> o	ou own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
■ No	o. Go to Part 7.	
☐ Ye	es. Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	ou have other property of any kind you did not already list?  nples: Season tickets, country club membership	
■ No		
	s. Give specific information	
54. <b>A</b> dd	the dollar value of all of your entries from Part 7. Write that number here	\$0.00
		Ψ0.00

Official Form 106A/B Schedule A/B: Property page 6

Filed 10/06/16 Entered 10/06/16 12:52:31 Desc Main Case 2:16-bk-56500 Doc 1

Page 16 of 65
Case number (if known) Document Debtor 1 Nakita S. Molloy List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 55. \$366,900.00 Part 2: Total vehicles, line 5 56. \$44,475.00 Part 3: Total personal and household items, line 15 \$3,000.00 57. 58. Part 4: Total financial assets, line 36 \$5,352.00 Part 5: Total business-related property, line 45 59. \$1,700.00

\$0.00

\$0.00

Copy personal property total

\$54,527.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

62.

Total personal property. Add lines 56 through 61...

\$421,427.00

\$54,527.00

Official Form 106A/B Schedule A/B: Property page 7

		IAMAIIII.	111 1 71111. 17 171	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nakita S. Molloy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the assessment and time and to the control of the Assessment of

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2012 Infiniti QX56 27,000 miles	\$44,475.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Ente from Governo 705.			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(2)
Household Goods Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellie Holli Genedale AV.B. 4.1			100% of fair market value, up to any applicable statutory limit	2020:00(\)(\)(\)(\)
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellio IIolii Govedave va E			100% of fair market value, up to any applicable statutory limit	
Pre-Paid Debit Card Line from Schedule A/B: 17.1	\$250.00		\$250.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Ente from Governo 705.			100% of fair market value, up to any applicable statutory limit	2020:00(1:)(0)
Huntington (Business checking) Line from Schedule A/B: 17.2	\$1,100.00		\$225.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line nom Schedule A/D. 11.2			100% of fair market value, up to any applicable statutory limit	2020.00(1)(0)

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Der	Nakita S. Widildy			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	nount of the exemption you claim Specific laws that allow exemp	
	Copy the value Schedule A/B		Che	eck only one box for each exemption.	
	Huntington (Business checking) Line from Schedule A/B: 17.2	\$1,100.00		\$875.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
				100% of fair market value, up to any applicable statutory limit	
	PNC (Checking) Line from Schedule A/B: 17.3	\$2.00		\$2.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Ellie Hotti Schedule PAB. 17.3			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
	Back Child Support Line from Schedule A/B: 29.1	\$4,000.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(11)
	Life from Schedule A/B. 23.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(11)
	Lap Top, Printer Line from Schedule A/B: 39.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(5)
	Elle Holli Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
	Make Up Supplies Line from Schedule A/B: 41.1	\$1,200.00		\$1,200.00	Ohio Rev. Code Ann. § 2329.66(A)(5)
	Elle Holli Genedale PAB. 4111			100% of fair market value, up to any applicable statutory limit	2023.00(A)(0)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	No				
	☐ Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

		Document	Page 1	9 01 65		
Filli	in this information to identify yo	ur case:				
Deb	tor 1 Nakita S. Mollo	у				
	First Name	Middle Name	Last Name		-	
	tor 2 use if, filing) First Name	Middle Name	Last Name		-	
` '	3,					
Unit	ed States Bankruptcy Court for the	SOUTHERN DISTRICT OF OHI	0		_	
Case (if knd	e number				□ Chack	if this is an
(	·····,				_	led filing
						3
Offi	icial Form 106D					
Sc	hedule D: Creditors	s Who Have Claims S	Secure	ed by Propert	:y	12/15
Do oo	complete and accurate as possible	If two married people are filing togethe	r both ara	agually recognished for a	unnlying correct informs	tion If more chase
is nee	eded, copy the Additional Page, fill it	out, number the entries, and attach it to				
	per (if known).					
	any creditors have claims secured b					
	_	this form to the court with your other s	schedules.	You have nothing else	to report on this form.	
	Yes. Fill in all of the information	below.				
Part	1: List All Secured Claims					
		more than one secured claim, list the cred			Column B	Column C
		s a particular claim, list the other creditors ical order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
				value of collateral.	claim	If any
2.1	First Federal Savings and Loan	Describe the property that secures the	ne claim:	\$377,475.00	\$366,900.00	\$10,575.00
	Creditor's Name	3256 Winding Woods Drive P				
		OH 43065 Delaware County	owen,			
		As of the date you file, the claim is: 0	book all that			
	14806 Detroit Avenue	apply.	nicok ali tilat			
	Lakewood, OH 44107	Contingent				
	Number, Street, City, State & Zip Code	Unliquidated				
Who	o owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_		☐ An agreement you made (such as m	ortgage or s	secured		
_	Debtor 1 only Debtor 2 only	car loan)	iorigage or a	iccurcu		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecl	hanic's lien)			
_	at least one of the debtors and another	☐ Judgment lien from a lawsuit	nariio o iiorij			
_	check if this claim relates to a	☐ Other (including a right to offset)				
(	community debt					
Date	debt was incurred	Last 4 digits of account numb	er			
2.2	Huntington National			<b>*</b> 40 000 00	044.475.00	40.00
2.2	Bank	Describe the property that secures the		\$40,623.00	\$44,475.00	\$0.00
	Creditor's Name	2012 Infiniti QX56 27,000 mile	es			
	PO Box 1558					
	4W25	As of the date you file, the claim is: Capply.	heck all that			
	Columbus, OH 43216	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		Disputed				
_	o owes the debt? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only	☐ An agreement you made (such as m car loan)	ortgage or s	secured		
	Debtor 2 only	_				
	Debtor 1 and Debtor 2 only at least one of the debtors and another	Statutory lien (such as tax lien, med	nanic's lien)			
	theck if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
	community debt	— Other (including a right to onset)				
Data	debt was incurred	Last A digits of coccupt numb	or			
vate	uent was illeuffed	Last 4 digits of account numb				

Official Form 106D

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Debtor 1 Nakita S. Molloy	(	Case number (if know)				
First Name Middle N	lame Last Name					
2.3 Midland Funding	Describe the property that secures the claim:	\$1,957.00	\$366,900.00	\$1,957.00		
Creditor's Name	3256 Winding Woods Drive Powell,					
	OH 43065 Delaware County					
8875 Aero Drive	As of the date you file, the claim is: Check all that					
San Diego, CA 92123	apply.					
	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	ıred				
Debtor 2 only	car loan)					
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
lacksquare At least one of the debtors and another	Judgment lien from a lawsuit					
☐ Check if this claim relates to a	☐ Other (including a right to offset)					
community debt						
Date debt was incurred 08/2015	Last 4 digits of account number					
		A 400 055 6	<u>_</u>			
•	Column A on this page. Write that number here:	\$420,055.0	10			
If this is the last page of your form, add Write that number here:	i the dollar value totals from all pages.	\$420,055.0	00			

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 2.10-DK-30300	Documer Documer			JZ.JI Desc	, iviaiii
Fill in thi	s information to identify your o					
Debtor 1	Nakita S. Molloy					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name			
	<i>5,</i>					
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT (	OF OHIO			
Case nun	nber					
(if known)					_	if this is an
					amend	ed filing
Official	Form 106E/F					
	ule E/F: Creditors W	ho Have Unsecu	red Claims			12/15
Schedule Deft. Attach	<ul> <li>Executory Contracts and Unexpi b: Creditors Who Have Claims Secuthe Continuation Page to this pagease number (if known).</li> <li>List All of Your PRIORITY Un</li> </ul>	ured by Property. If more spa e. If you have no information	ce is needed, copy the Pa	art you need, fill it out, i	number the entries in	the boxes on the
	v creditors have priority unsecured					
	. Go to Part 2.	a ciainis against you?				
■ Ye						
2. List al identify possib	s.  I of your priority unsecured claims what type of claim it is. If a claim ha le, list the claims in alphabetical orde If more than one creditor holds a pa	s both priority and nonpriority a r according to the creditor's na	amounts, list that claim here me. If you have more than	and show both priority a	nd nonpriority amount	s. As much as
(For a	n explanation of each type of claim, s	ee the instructions for this form	in the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1	RS	Last 4 digits of a	account number	\$16,970.65	\$16,970.65	\$0.00
	riority Creditor's Name	When was the d	eht incurred?			
	hiladelphia, PA 19101-7346					
	umber Street City State Zlp Code	As of the date ye	ou file, the claim is: Chec	k all that apply		
Who	incurred the debt? Check one.	☐ Contingent				
■ D	ebtor 1 only	☐ Unliquidated				
□ D	ebtor 2 only	☐ Disputed				
□ D	ebtor 1 and Debtor 2 only	Type of PRIORIT	ΓY unsecured claim:			
ПА	t least one of the debtors and anothe	r Domestic sup	port obligations			
□с	heck if this claim is for a commun	ity debt Taxes and ce	rtain other debts you owe t	ne government		
Is the	e claim subject to offset?	☐ Claims for dea	ath or personal injury while	you were intoxicated		
■ N	0	Other Specifi				

**Income Tax** 

☐ Yes

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Debtor 1 Nakita S. Molloy Case number (if know) State of Ohio Department of \$3,000.00 \$3,000.00 \$0.00 2.2 **Taxation** Last 4 digits of account number Priority Creditor's Name PO Box 530 When was the debt incurred? Columbus, OH 43216-0530 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes **Income Tax** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 **American Home Shield** Last 4 digits of account number \$103.04 Nonpriority Creditor's Name PO Box 1259 When was the debt incurred? Oaks, PA 19456 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Account

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Debtor 1 Nakita S. Molloy Case number (if know) 4.2 \$1,623.00 **BYL Services** Last 4 digits of account number Nonpriority Creditor's Name 301 Lacey Street When was the debt incurred? West Chester, PA 19382 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections for Total Gym ☐ Yes 4.3 **Capital One** Last 4 digits of account number \$942.00 Nonpriority Creditor's Name When was the debt incurred? PO BOX 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Kohls Credit Card** Other. Specify 4.4 Check N. Go Last 4 digits of account number \$917.67 Nonpriority Creditor's Name When was the debt incurred? 7755 Montgomery Road Suite 400 Cincinnati, OH 45236 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Cash Advance ☐ Yes

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Nakita S. Molloy	Case number (if know)	
First Premier Bank	Last 4 digits of account number	\$1,036.00
Nonpriority Creditor's Name 3820 N. Louise Avenue Sioux Falls, SD 57107	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Huntington National Bank	Last 4 digits of account number	\$18.42
Nonpriority Creditor's Name PO Box 1558	When was the debt incurred?	
4W25 Columbus, OH 43216		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Negative Bank Account	
HY Cite Corporation	Last 4 digits of account number	\$3,710.00
Nonpriority Creditor's Name 333 Holtzman Road	When was the debt incurred?	
Madison, WI 53713  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Contract	

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Debto	Nakita S. Molloy	Case number (if know)	
4.8	Majestic Lake Financial	Last 4 digits of account number	\$1,855.00
	Nonpriority Creditor's Name	<del></del>	
	635 East Hwy 20, K	When was the debt incurred?	
	Upper Lake, CA 95485  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok all that apply	
	■ Debtor 1 only	Пол	
		Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Account	
4.9	Midland Funding	Last 4 digits of account number	\$2,263.00
	Nonpriority Creditor's Name	<del></del>	, ,
	8875 Aero Drive	When was the debt incurred?	
	San Diego, CA 92123  Number Street City State Zlp Code	As of the date year file the claim in Charles II that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections for Synchrony	
4.1	N. 41 Ol A		<b>\$440.00</b>
0	North Shore Agency	Last 4 digits of account number	\$118.23
	Nonpriority Creditor's Name PO Box 9205	When was the debt incurred?	
	Old Bethpage, NY 11804		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections for Disney Movie Club	
	<b>□</b> 162	Other. Specify	

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Nakita S. Molloy	Case number (if know)	
Onemain Financial	Last 4 digits of account number	\$11,139.00
Nonpriority Creditor's Name 4730 Cemetery Rd Hilliard, OH 43026	When was the debt incurred?	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Loan	
Portfolio Recovery	Last 4 digits of account number	\$977.00
Nonpriority Creditor's Name 120 CORPORATE BLVD Norfolk, VA 23502	When was the debt incurred?	
lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collections for Comenity Bank	
Portfolio Recovery	Last 4 digits of account number	\$438.00
Nonpriority Creditor's Name 120 CORPORATE BLVD	When was the debt incurred?	,
Norfolk, VA 23502 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collections for Comenity Bank	

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Debtor 1 Nakita S. Molloy Case number (if know) 4.1 Portfolio Recovery \$519.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 120 CORPORATE BLVD When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections for Comenity 4.1 Portfolio Recovery \$735.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections for Synchrony ☐ Yes 4.1 Portfolio Recovery \$1.552.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **120 CORPORATE BLVD** When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections for Walmart ☐ Yes

Document Page 28 of 65 Debtor 1 Nakita S. Molloy Case number (if know) 4.1 Portfolio Recovery \$2,248.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections for Citibank 4.1 Portfolio Recovery \$1,462.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 120 CORPORATE BLVD When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections for Catherines ☐ Yes 4.1 Transworld Systems \$8.032.93 9 Last 4 digits of account number Nonpriority Creditor's Name 507 Prudential Road When was the debt incurred? Horsham, PA 19044 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Account

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	- Hamila of money		
4.2 0	Transworld Systems	Last 4 digits of account number	\$157.14
	Nonpriority Creditor's Name 507 Prudential Road Horsham. PA 19044	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections for TruGreen	
4.2	Universal Dermatology	Last 4 digits of account number	\$75.00
,	Nonpriority Creditor's Name 425 Metro Place North	When was the debt incurred?	
	Suite 195 Dublin, OH 43017		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.2 2	Webbank/Fingerhut	Last 4 digits of account number	\$774.00
	Nonpriority Creditor's Name PO Box 81607	When was the debt incurred?	
	Austin, TX 78708  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	To of the date year me, the stand to. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify Account	

## Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Nakita S. Molloy		Case number (if know)	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
Comenity Bank	Line <u>4.12</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 182120 Columbus, OH 43218		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
Ohio Attorney General	Line <b>4.9</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims	
150 E. Gay Street Columbus, OH 43215		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Columbus, O11 43213	Last 4 digits of account number		
Name and Address	•	2 did you list the original creditor?	
Synchrony Bank	Line <b>4.16</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims	
Bankruptcy Department PO Box 965060		Part 2: Creditors with Nonpriority Unsecured Claims	
Orlando, FL 32896			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
Weltman Weinberg & Reis	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
3705 Marlane Drive Grove City, OH 43123		■ Part 2: Creditors with Nonpriority Unsecured Claims	
010 ve 01ty, 011 43123	Last 4 digits of account number		

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 19,970.65
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 19,970.65
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 40,695.43
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 40,695.43

		12100111		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Nakita S. Molloy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			<del>-</del>
	City		State	ZIP Code	<del></del>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

		Docume	ent Page 32 d	of 65
Fill in this	information to identify your	case:		
Debtor 1	Nakita S. Molloy			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case numb	ber			
(if known)				☐ Check if this is an
				amended filing
Official	l Form 106H			
		-1-1		
Sched	lule H: Your Cod	eptors		12/15
1. Do y	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.
☐ Yes	5			
	hin the last 8 years, have you a, California, Idaho, Louisiana,			ry? (Community property states and territories include ington, and Wisconsin.)
`	Go to line 3.  bid your spouse, former spouse.	use, or legal equivalent live	e with you at the time?	
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
=	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

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Fill	in this information to identify your ca	ase:									
Del	otor 1 Nakita S. Mo	olloy			_						
	otor 2 ouse, if filing)				-						
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	T OF OHIO		_						
(If kr	fficial Form 106l					☐ A su 13 ii	amende uppleme	nt showing		petition cha g date:	
	chedule I: Your Inc		unio aro filina togotho	r (Dobte	r 1 a	nd Dobto	r 2) hat	h aro ogu	ually ro	snonsible	12/15
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse is e inforn	s livir natio	ng with yo n about yo	ou, inclu our spo	ide inforn use. If mo	nation ore spa	about you ace is nee	ur eded,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2	or non-fi	ling sp	oouse	
	If you have more than one job,	Employment status	■ Employed				<b>]</b> Emplo	yed			
	attach a separate page with information about additional	Employment status	□ Not employed				☐ Not er	nployed			
	employers.	Occupation	Self Employed								
	Include part-time, seasonal, or self-employed work.	Employer's name	Nakita Molloy								
	Occupation may include student or homemaker, if it applies.	Employer's address	3256 Winding Wo		rive						
		How long employed the	here? 12 years	i			_				_
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for a	any lir	ne, write \$	0 in the	space. Inc	clude y	our non-fili	ing
	u or your non-filing spouse have mo		ombine the information	for all e	mploy	yers for tha	at persoi	n on the li	nes be	low. If you	need
						For Debto	or 1	For Del non-fili			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_		0.00	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

0.00

N/A

Debt	or 1	Nakita S. Molloy	-	Case	number (if known)				
					Debtor 1	1	For Debtor	spouse	
	Сор	y line 4 here	4.	\$_	0.00	- 5	<u> </u>	N/A	_
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	_		N/A N/A N/A N/A N/A N/A N/A	- - - - -
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	9	6	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	9	5	N/A	
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e. 8f. 8g. 8h.+		5,382.50 0.00 674.00 0.00 0.00 0.00			N/A N/A N/A N/A N/A	- - - - -
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	6,056.50		<u> </u>	N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		6,056.50 +	3	N/A	= \$ _	6,056.50
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	•	,	,	in <i>Schedul</i> e	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						\$Combin	
13.	Do y	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?					monthl	y income

Fill	in this informa	tion to identify yo	our çase:			l		
	tor 1	Nakita S. Mo				Ched	ck if this is:	
		Transa or me			_		An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:
` .		uptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO		-	MM / DD / YYYY	
0								
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	nses				12/1:
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar				
Par		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to	= .	in a sonar	ate household?				
	□ res. <b>Doe</b>		iii a sepai	ate nousenou:				
	= ::	-	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		11	Yes
					0		40	□ No
					Son		16	■ Yes □ No
					Son		17	■ Yes
								□ No
								☐ Yes
3.	expenses o	oenses include f people other t d your depende	han $\square$	No Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
the	value of sucl	h assistance an		government assistance i			Your expe	2000
(Off	ficial Form 10	)6l.)					rour expe	enses
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4. \$	S	0.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$	5	0.00
	•	rty, homeowner's				4b. \$	S	0.00
		maintenance, re owner's associat	•	upkeep expenses		4c. \$		0.00
5.				dominium dues <b>our residence,</b> such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor 1	Nakita S. Molloy	Case num	ber (if known)	
S. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	340.00
6b.	Water, sewer, garbage collection	6b.	\$	46.50
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	<u> </u>	\$	780.00
	dcare and children's education costs	8.	\$	60.00
_	hing, laundry, and dry cleaning	9.	\$	185.00
	sonal care products and services	10.	\$	70.00
	ical and dental expenses	11.	\$	80.00
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	00.00
	ot include car payments.	12.	\$	265.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	ritable contributions and religious donations	14.	·	0.00
. Insu		17.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	180.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	cify: Self Employment Taxes	16.	\$	350.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
. You	r payments of alimony, maintenance, and support that you did not report as		_	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on School			
20a.	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	•	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:	21.	+\$	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,606.50
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,606.50
Cala	sulate your monthly not income			
	culate your monthly net income.	23a.	¢	6 0E6 F0
	Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.	23a. 23b.	·	6,056.50
230.	Copy your monthly expenses from line 220 above.	۷۵۵.	-Ψ	2,606.50
23c.	Subtract your monthly expenses from your monthly income.	006	e e	3,450.00
	The result is your <i>monthly net income</i> .	23c.	\$	3,450.00
	ou expect an increase or decrease in your expenses within the year after yo			
	xample, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?	r mortgage	payment to increase	or decrease because of
_				
$\square$ Y	es. Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Nakita S. Molloy				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	CT OF OHIO		
Case number					
(if known)					☐ Check if this is an amended filing
~# · · -					
Official Forr	<u>m 106Dec</u>				
Declarat	tion About a	n Individua	I Debtor's	Schedules	12/15
If two married po	eople are filing together	. both are equally rest	onsible for supplyi	ng correct information.	
obtaining mone		n connection with a ba			tement, concealing property, or 000, or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an att	orney to help you fi	II out bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
				Dodardio	, and dignature (Smotal Form 170)
•	alty of perjury, I declare e true and correct.	that I have read the su	mmary and schedu	les filed with this declarat	ion and
lell (s) X	kita S. Molloy		х		
	S. Molloy			ature of Debtor 2	
	re of Debtor 1		Signe	2. 200001 2	

Date \_\_\_\_\_

Date October 6, 2016

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F:11 :-	n dhia infann					
		nation to identify you				
Debt	or 1	Nakita S. Molloy First Name	Middle Name	Last Name		
Debt	or 2					
(Spous	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF OHIO		
Case (if know	e number _				-	heck if this is an mended filing
Sta Be as	complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
Part			urital Status and Where You	Lived Before		
۱. ۱	What is you	r current marital statu	ıs?			
[ 	<ul><li>☐ Married</li><li>☐ Not mar</li></ul>	ried				
2. [	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
] [	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
] ]	■ No □ Yes. Ma	ske sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[ 	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	-	of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$59,480.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

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Debtor 1 Nakita S. Molloy

				Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	or last caler anuary 1 to		31, 2015 )	☐ Wages, commissions, bonuses, tips	\$37,524.00	☐ Wages, combonuses, tips	missions,	
				Operating a business		☐ Operating a	business	
	or the calen anuary 1 to			☐ Wages, commissions, bonuses, tips	\$38,937.00	☐ Wages, combonuses, tips	missions,	
				Operating a business		☐ Operating a	business	
5.	Include incand other winnings.  List each	come regard public bene If you are fil	fless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a rest; dividends; money collect ou received together, list it o	ted from lawsuits; nly once under De	royalties; and ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	art 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	r debts? Imer debts. Consumer debts	are defined in 11	U.S.C. § 10°	I(8) as "incurred by an
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do								
		* Subject		payments to an attorney for the ton 4/01/19 and every 3 years	, ,	or after the date o	f adjustment.	
	Yes.			r both have primarily consure you filed for bankruptcy, di		of \$600 or more?	,	
		■ No.	Go to line 7					
		□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

still owe

paid

ase number (if known) Debtor 1 Nakita S. Molloy Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment **Total amount** still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Midland Funding v. Nakita Molloy Civil **Delaware County Municipal** Pending 15 CVF 00871 Court On appeal □ Concluded First Federal Savings & Loan v. **Foreclosure Delaware County Common** Pending **Nakita Molloy** Pleas □ On appeal 16 CVE 09 0595 ☐ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

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Document

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Debtor 1 Nakita S. Molloy

Pai	t 5: List Certain Gifts and Contributions			
13.	■ No	y, did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contri	y, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	how the loss occurred Incl	scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending arance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep	r, did you or anyone else acting on your behalf pay of aring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was	payment
	Granger Law Firm 3757 Attucks Drive Powell, OH 43065	Legal Fees	October 2016	\$90.00
	Debtorcc.org 378 Summit Avenue Jersey City, NJ 07306	Credit Counseling	September 2016	\$15.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Case 2:16-bk-56500 Doc 1 Filed 10/06/16 Entered 10/06/16 12:52:31 Desc Main Page 42 of 65 Document Case number (if known) Debtor 1 Nakita S. Molloy transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was property transferred payments received or debts **Address** made paid in exchange Person's relationship to you 1999 Ford Expedition (not **Unrelated Third Party** Sold for \$1,000 (Fair 2015 running) Market Value) **Unrelated Third Party** Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred XXXX-November 2015 \$0.00 Huntington Checking **POBOX 1558** □ Savings **DEPT EAW25** ☐ Money Market Columbus, OH 43216 ☐ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.

Who else has or had access

Address (Number, Street, City,

State and ZIP Code)

to it?

Describe the contents

Address (Number, Street, City, State and ZIP Code)

Name of Storage Facility

Do you still have it?

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Debtor 1 Nakita S. Molloy

Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any prop	erty y	ou borrowed from, are storing for	or hold in trust			
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Pai	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, grou	_	•				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	al law,	whether you now own, operate, o	r utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		us wa	ste, hazardous substance, toxic s	ubstance,			
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of wh	en the	ey occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liab	le un	der or in violation of an environme	ntal law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Pai	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have	any of	the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	-	-	-				
	☐ A member of a limited liability company		-	•				
	☐ A partner in a partnership	, , ,	i- (-	,				
	☐ An officer, director, or managing execu	tive of a corporation						
	An owner of at least 5% of the veting or	-	n					

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Debtor 1 Nakita S. Molloy

28.

lacksquare No. None of the above applies. Go to $lacksquare$	No. None of the above applies. Go to Part 12.						
■ Yes. Check all that apply above and fil	Yes. Check all that apply above and fill in the details below for each business.						
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed					
Nakita Molloy 3256 Winding Woods Drive Powell, OH 43065 Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	Mail Order Make Up Supplies	EIN: 7637  From-To 2004- Current  nyone about your business? Include all financial					
■ No □ Yes. Fill in the details below.							
Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Part 12: Sign Below		
are true and correct. I understand that mal	of Financial Affairs and any attachments, and I d king a false statement, concealing property, or ob up to \$250,000, or imprisonment for up to 20 year	taining money or property by fraud in connection
/s/ Nakita S. Molloy Nakita S. Molloy	Signature of Debtor 2	
Signature of Debtor 1		
Date October 6, 2016	Date	
Did you attach additional pages to Your S	tatement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
, , , , , ,	is not an attorney to help you fill out bankruptcy	forms?
■ No		
☐ Yes. Name of Person Attach the E	Bankruptcy Petition Preparer's Notice, Declaration, ar	nd Signature (Official Form 119).

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#### **LBR Form 2016-1(b)**

### UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Nakita S. Molloy		Case No.
Nukita 6. Monoy		Chapter 13
	Debtor(s)	Judge

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

#### I. Disclosure

1.	<u>Disclosure</u>
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a follows:
	For legal services, I have agreed to accept \$ 3,500.00
	Prior to the filing of this statement I have received \$ 90.00
	Balance Due \$ 3,410.00
2.	The source of the compensation paid to me was:  ■ Debtor □ Other (specify):
3.	The source of compensation to be paid to me is:  ■ Debtor □ Other (specify):
4.	■ I have not agreed to share the above-disclosed compensation with any other persons unless they are members and/or associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

#### II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required;
  - c. Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required;
  - d. Preparation and filing of payroll orders and amended payroll orders;
  - e. Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof;
  - f. Filing of address changes;
  - g. Routine phone calls and questions;
  - h. Review of claims;
  - i. Review of notice of intention to pay claims;
  - j. Preparation and filing of objections to non-real estate and non-tax claims;

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- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.
   Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
- 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

October 6, 2016

Date

/s/ Katharine R. Granger

Katharine R. Granger

Katharine R. Granger Signature of Attorney 0079143 Granger Law Firm LLC 3757 Attucks Drive Powell, OH 43065 614-389-4941

Fax: 614-389-3857

kgranger@granger-law-firm.com

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Fill in this information to identify your case:					
Debtor 1	Nakita S. Molloy				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Southern District of Ohio					
Case number (if known)					

Check as dire	Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	cosable income is determined under 11 .C. § 1325(b)(3).					
☐ 3. The	commitment period is 3 years.					
■ 4. The	commitment period is 5 years.					

☐ Check if this is an amended filing

#### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	••••••••••••••••••••••••••••••••••••••	,.					
Par	11: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one	only.					<u> </u>
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married. Fill out both Columns A and B, lines 2-1	1.					
1 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 are 6 months, add the income for all 6 months and divide the topouses own the same rental property, put the income from the	6-month per otal by 6. Fill	iod would be in the resul	e March 1 throu lt. Do not includ	igh August 31. If the amele any income amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtim payroll deductions).	e, and co	mmission	s (before all	\$	\$	
3.	<b>Alimony and maintenance payments.</b> Do not inclu Column B is filled in.	de paymeı	nts from a	spouse if	\$	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Include old, your o spouse or	e regular co lependents	ontributions s, parents,	\$ 674.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1				
	Gross receipts (before all deductions)	S	7,242.	.50			
	Ordinary and necessary operating expenses	§	0.	.00			
	Net monthly income from a business, profession, or farm	S	7,242.	Copy .50 here ->	\$ 7,242.50	\$	
6.	Net income from rental and other real property	Debtor					
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00				
	Net monthly income from rental or other real property	/ \$	0.00 C	copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Nakita S. Molloy Case number (if known) Debtor 1 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 7,916.50 7.916.50 +|\$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 7,916.50 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 7,916.50 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 7,916.50 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

94,998.00

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Debt	or 1	Nakita S. Molloy		Case number (if known)	
16	. Cal	culate the median family income that applies to y	ou. Follow these steps:		
	16a	. Fill in the state in which you live.	ОН		
	16b	. Fill in the number of people in your household.	4		
	16c	. Fill in the median family income for your state and To find a list of applicable median income amounts instructions for this form. This list may also be available.	s, go online using the link specif		\$78,983.00
17	'. Hov	w do the lines compare?			
	17a	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N			
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 a	lation of Your Disposable Inc		
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	by your total average monthly income from line 1	1.	\$_	7,916.50
19.	con	<b>fuct the marital adjustment if it applies.</b> If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.	married, your spouse is not filir 1 U.S.C. § 1325(b)(4) allows yo	ng with you, and you ou to deduct part of your	
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.	<b>-</b> \$_	0.00
	19b	. Subtract line 19a from line 18.			\$
20.	Cal	culate your current monthly income for the year.	Follow these steps:		
	20a	. Copy line 19b			\$7,916.50
		Multiply by 12 (the number of months in a year).			<b>x</b> 12
	20b	. The result is your current monthly income for the y	ear for this part of the form		\$ 94,998.00
	20c	. Copy the median family income for your state and	size of household from line 16c	· <u>·</u>	\$78,983.00
	21.	How do the lines compare?			
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the court, on the	top of page 1 of this form, check box	x 3, The commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise ordered by the o	court, on the top of page 1 of this for	m, check box 4, The
Par	t 4:	Sign Below			
	By	signing here, under penalty of perjury I declare that t	he information on this statemen	nt and in any attachments is true and	d correct.
)	<b>(</b> /s	/ Nakita S. Molloy			
		akita S. Molloy gnature of Debtor 1			
		October 6, 2016 MM / DD / YYYY			
	If yo	ou checked 17a, do NOT fill out or file Form 122C-2.			

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in	this information to	identify your case:						
Debtor	1 Nakita S	. Molloy						
Debtor (Spous	ee, if filing)							
United	States Bankruptcy (	Court for the: South	ern District of Ohio					
Case n	number wn)					☐ Check if th	is is an amende	d filing
	Form 122C-2 pter 13 Cal	culation of	Your Dispo	osable Ir	icome			04/10
	out this form, you w itment Period (Office	vill need your compl sial Form 122C-1).	eted copy of <i>Chapt</i>	ter 13 Stateme	nt of Your Curre	nt Monthly Inco	me and Calculation	on of
space i	s needed, attach a	rate as possible. If to separate sheet to th ur name and case n	is form, Include the					
Part 1:	Calculate You	r Deductions from \	our Income					
the	questions in lines	Service (IRS) issues 6-15. To find the IRS be available at the ba	standards, go onli	ine using the li				
expe	enses if they are hig	ounts set out in lines oner than the standard uct any amounts that	s. Do not include an	y operating exp	enses that you su	ibtracted from in	come in lines 5 and	
If yo	ur expenses differ fr	om month to month,	enter the average ex	rpense.				
Note	e: Line numbers 1-4	are not used in this fo	orm. These numbers	apply to inform	ation required by	a similar form us	sed in chapter 7 ca	ses.
5.	The number of pe	ople used in determ	ining your deduction	ons from inco	ne			
	plus the number of	f people who could be any additional depen ble in your household.	dents whom you sup				4	
Nati	onal Standards	You must use t	he IRS National Sta	indards to answ	er the questions i	n lines 6-7.		
6.		nd other items: Using e dollar amount for for			in line 5 and the	IRS National	\$	1,509.00
7.	the dollar amount for people who are 65	olth care allowance: or out-of-pocket healt or olderbecause old amount, you may de	h care. The number ler people have a hig	of people is spl gher IRS allowa	it into two categor Ince for health car	iespeople who	are under 65 and	

Official Form 22C-2

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Document Page 52 of 65 Nakita S. Molloy Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. 216.00 Copy here=> 216.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 130 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 7g. **Total.** Add line 7c and line 7f 216.00 216.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 634.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,870.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment First Federal Savings and Loan 2,576.00 Copy Repeat this amount 2,576.00 2,576.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Copy

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

0.00 0.00 here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

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Nakita S. Molloy Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 191.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. **Describe Vehicle 1:** Vehicle 1 2012 Infiniti QX56 27,000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 471.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Huntington National Bank** 677.05 Repeat this Copy amount on line 33b. **Total Average Monthly Payment** 677.05 677.05 Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ Copy Repeat this here amount on line Total average monthly payment 0.00 Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Nakita S. Molloy Case number (if known)

		In addition to the expense d the following IRS categories		listed above	, you are allowed your monthly expenses	for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						0.00
17.	<ol> <li>Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.</li> </ol>						
	· · · · · · · · · · · · · · · · · · ·		o, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	8. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						0.00
19.	<ol> <li>Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.</li> <li>Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.</li> </ol>						0.00
20.	Education: The total month	ly amount that you pay for e	ducation	that is either i	required:		
	as a condition for your jo	b, or					
	for your physically or me	ntally challenged dependent	child if n	o public educ	ation is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthl Do not include payments for			-	sitting, daycare, nursery, and preschool.	\$	0.00
22.		n and welfare of you or your	depende	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		0.00
	Payments for health insuran	ce or health savings accour	nts should	be listed only	y in line 25.	\$	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						
	expenses, such as those rep					+\$	0.00
24.	expenses, such as those rep Add all of the expenses al Add lines 6 through 23.	ported on line 5 of Official Fo	orm 122C	-1, or any am		+\$    \$	2,550.00
	Add all of the expenses al	ported on line 5 of Official Fo	orm 122C  nse allow  eductions	-1, or any am vances. allowed by the	ount you previously deducted.		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	lowed under the IRS expenses  These are additional de Note: Do not include au  y insurance, and health sa	orm 122C nse allow eductions ny expens avings ac	allowed by the allowances count expen	ount you previously deducted.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran	lowed under the IRS expenses  These are additional de Note: Do not include au  y insurance, and health sa	orm 122C nse allow eductions ny expens avings ac	allowed by the allowances count expen	ne Means Test. Is listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents.	lowed under the IRS expenses  These are additional de Note: Do not include au  y insurance, and health sa	nse allow eductions ny expens avings ac unts that	allowed by the se allowances count expensare reasonab	ne Means Test. Is listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance	s These are additional do Note: Do not include a y insurance, and health sace, and health sace, and health sace,	nse allow eductions ny expens avings ac unts that	rances. allowed by the se allowances count expensare reasonab	ne Means Test. Is listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance Disability insurance	s These are additional do Note: Do not include a y insurance, and health sace, and health sace, and health sace,	eductions avings acunts that	allowed by the se allowances count expensare reasonab 0.00 0.00	ne Means Test. Is listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions:  Health insurance, disability insurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this to	s These are additional do Note: Do not include any insurance, and health sace, and health sace, and health sace, and health sace.	eductions avings acunts that  \$	allowed by the seallowances count expensare reasonab  0.00  0.00  0.00	ne Means Test. Is listed in lines 6-24.  Is less. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	2,550.00
Add	Add all of the expenses al Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disabilitinsurance, disability insurancy our dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you	s These are additional do Note: Do not include any insurance, and health sace, and health sace, and health sace, and health sace.	eductions ny expensions that  \$	allowed by the seallowances count expensare reasonab  0.00  0.00  0.00	ne Means Test. Is listed in lines 6-24.  Is less. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	2,550.00
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions:  Health insurance, disability insurancy dependents.  Health insurance Disability insurance Disability insurance Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason	Joved under the IRS expenses  These are additional de Note: Do not include an y insurance, and health sace, and health sace, and health savings account amount?  Do the care of household or onable and necessary care a for your immediate family who	eductions ny expens avings ac unts that  \$  \$  family n and suppo o is unable	allowed by the seallowances.  allowed by the seallowances.  count expensare reasonab  0.00  0.00  0.00  0.00  onembers. The opt of an elder et o pay for s	count you previously deducted.  The Means Test. Is listed in lines 6-24.  The monthly expenses for health ly necessary for yourself, your spouse, or yourself, your spouse, or yourself, your spouse, or actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$r	2,550.00
25. 26.	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions:  Health insurance, disability insurance, disability insurance, disability insurancy dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason your household or member a include contributions to an are protection against family or second in the same and the same and the same are saven against family or saven and the same are saven against family or saven and saven against family or saven and saven and saven against family or saven and saven against family or saven against family	corted on line 5 of Official Followed under the IRS expensions.  These are additional do Note: Do not include at y insurance, and health sace, and health savings account and health savings account actually spend?  The care of household or onable and necessary care a for your immediate family whice count of a qualified ABLE priolence. The reasonably necessary care and the count of a qualified ABLE priolence.	eductions ny expens avings acunts that	allowed by the se allowances.  allowed by the se allowances.  count expensare reasonabe.  0.00	count you previously deducted.  The Means Test. Is listed in lines 6-24.  The monthly expenses for health ly necessary for yourself, your spouse, or yourself, your spouse, or yourself, your spouse, or actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$r	2,550.00

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ebtor 1	Nakita S. Molloy		se number ( <i>if known</i> )				
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance	e and operating	expenses	s on		
	If you believe that you have home energy on the fill in the excess amount of home ended.	costs that are more than the home energy cosnergy costs	ts included in ex	kpenses (	on line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must ary.	show that the ac	dditional		\$	0.0
		dren who are younger than 18. The monthly ependent children who are younger than 18 younger th					
	You must give your case trustee document claimed is reasonable and necessary and i	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why the	amount			
	* Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or a	fter the date of a	djustmer	nt.	\$	0.0
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		rate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.0
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in amount that you will continue to contribute in amount (4).	n the form of cas	sh or finar	ncial		
	Do not include any amount more than 15%	of your gross monthly income.				_ \$ _	0.0
	Add all of the additional expense deduc Add lines 25 through 31.	tions.				\$	0.00
Dedu	ictions for Debt Payment						
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages, ve	hicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	e to each secur	ed			
	Mortgages on your home					Averag payme	e monthly
33a.	Copy line 9b here				=>	\$	2,576.00
	Loans on your first two vehicles						
33b.	Copy line 13b here				=>	\$	677.05
33c.	0 " 10 "				=>	\$	0.00
33d.	List other secured debts:						
	e of each creditor for other secured debt	Identify property that secures the debt	inc	es payme lude taxe nsurance	S		
				No			
	-NONE-			Yes		\$	
						Ψ	
				No			
				No Yes		\$	
				Yes		\$	
				Yes No		·	
				Yes		\$ 	

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btor 1 Nak	ita S. Molloy			Case	e number (if known)		
•	debts that you listed in lin- property necessary for yo		•		,		
□ No.	Go to line 35.						
■ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property (					
Name of the	creditor	Identify property that secu	ires the deb		Total cure amount	Monthl	
First Fed	eral Savings and Loan	3256 Winding Wood OH 43065 Delaware		\$	14,000.00		233.33
				\$ \$		$\div 60 = \$$ $\div 60 = +\$$	
						Copy	
				Total	\$ 233.33	here=> \$	233.33
_		II of these priority claims. D ch as those you listed in line lue priority claims	e 19.		\$19,970.65	<b>5</b> _ ÷60 \$_	332.84
36. Projecte	ed monthly Chapter 13 plan	n payment		:	\$3,450.00	<u>)</u>	
Office of the Exec To find a	multiplier for your district as s the United States Courts (fo cutive Office for United States list of district multipliers that incluinstructions for this form. This list	r districts in Alabama and N s Trustees (for all other dist ides your district, go online usir	North Caroli ricts). ng the link sp	na) or by ecified in the	×6.00		
	monthly administrative expe				\$207.00	Copy total here=> \$	207.00
	l of the deductions for debtes 33e through 36.	t payment.				\$	4,026.22
Total Deduc	ctions from Income						
38. Add all	of the allowed deductions.						
expens			\$	2,550.00	_		
	ne 32, All of the additional ex		\$	0.00	_		
Copy li	ne 37, All of the deductions f	or debt payment	+\$	4,026.22	-		
Tatal	a divertia a a		•	6 576 22	0	. •	6 576 22

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Debtor 1	Nak	ita S. Mollo	у		_	Case	e nun	nber ( <i>if known</i> )		
Part 2	e De	termine You	r Disposable Income Under 11 U.S.C.	§ 1325	(b)(	(2)				
39.			ent monthly income from line 14 of Fo Current Monthly Income and Calculation						\$	7,916.50
	children disability received	The monthly payments for in accordance	ly necessary income you receive for s y average of any child support payments or a dependent child, reported in Part I of the with applicable nonbankruptcy law to anded for such child.	s, foster f Form 1	r ca 122	re payments, or C-1, that you	9	674.	.00_	
	employe in 11 U.S	r withheld fro S.C. § 541(b)(	tirement deductions. The monthly tota m wages as contributions for qualified re (7) plus all required repayments of loans § 362(b)(19).	etireme	nt p	lans, as specified	9	S0	.00	
42.	Total of	all deduction	ns allowed under 11 U.S.C. § 707(b)(2	)(A). Co	ору	line 38 here=>	. \$	6,576	.22	
	expense their exp	s and you ha enses. You n	al circumstances. If special circumstan ve no reasonable alternative, describe the nust give your case trustee a detailed expecumentation for the expenses.	he spec	ciál	circumstances and	t			
Des	scribe th	e special cir	cumstances			Amount of exper	nse			
					\$	}				
					- \$			_		
					- · \$			_		
							7	_		
			ו	「otal \$	S	0.00		opy ere=> \$ 	0.00	
44.	Total ad	ljustments. A	Add lines 40 through 43.			=>  \$	S	7,250.22	Copy here=> -\$	7,250.22
45.	Calcula	te your mont	hly disposable income under § 1325(	<b>b)(2).</b> S	Subt	ract line 44 from lir	ne 3	39.	\$	666.28
Part 3	Ch	ange in Inco	ome or Expenses							
	have cha time you you filed	anged or are r r case will be your petition	r expenses. If the income in Form 1220 virtually certain to change after the date open, fill in the information below. For e, check 122C-1 in the first column, enter n when the increase occurred, and fill in	you file example line 2 i	ed yo e, if t n th	our bankruptcy pet the wages reported the second column,	titioi d in	n and during the creased after		
Fori	m	Line	Reason for change			Date of change		Increase or decrease?	Amount of	change
	122C-1 122C-2 122C-1 122C-2 122C-1 122C-2 122C-1 122C-2							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	

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Debtor 1	Nakita S. Molloy	Case number (if known)
Part 4:	Sign Below	
X	/s/ Nakita S. Molloy	e that the information on this statement and in any attachments is true and correct.
	Nakita S. Molloy Signature of Debtor 1	
	October 6, 2016 MM / DD / YYYY	

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Debtor 1 Nakita S. Molloy Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 04/01/2016 to 09/30/2016.

#### Line 4 & 40 - Child support income (including foster care and disability)

Source of Income: **Child Support** Constant income of **\$674.00** per month.

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Business Income** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	04/2016	\$7,350.00	\$0.00	\$7,350.00
5 Months Ago:	05/2016	\$7,250.00	\$0.00	\$7,250.00
4 Months Ago:	06/2016	\$7,525.00	\$0.00	\$7,525.00
3 Months Ago:	07/2016	\$7,100.00	\$0.00	\$7,100.00
2 Months Ago:	08/2016	\$6,980.00	\$0.00	\$6,980.00
Last Month:	09/2016	\$7,250.00	\$0.00	\$7,250.00
_	Average per month:	\$7,242.50	\$0.00	
			Average Monthly NET Income:	\$7,242.50

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. American Home Shield PO Box 1259 Oaks, PA 19456

BYL Services 301 Lacey Street West Chester, PA 19382

Capital One PO BOX 30281 Salt Lake City, UT 84130

Check N. Go 7755 Montgomery Road Suite 400 Cincinnati, OH 45236

Comenity Bank PO Box 182120 Columbus, OH 43218

First Federal Savings and Loan 14806 Detroit Avenue Lakewood, OH 44107

First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107

Huntington National Bank PO Box 1558 4W25 Columbus, OH 43216

HY Cite Corporation 333 Holtzman Road Madison, WI 53713

IRS PO Box 7346 Philadelphia, PA 19101-7346

Majestic Lake Financial 635 East Hwy 20, K Upper Lake, CA 95485

Midland Funding 8875 Aero Drive San Diego, CA 92123

North Shore Agency PO Box 9205 Old Bethpage, NY 11804 Ohio Attorney General 150 E. Gay Street Columbus, OH 43215

Onemain Financial 4730 Cemetery Rd Hilliard, OH 43026

Portfolio Recovery 120 CORPORATE BLVD Norfolk, VA 23502

State of Ohio Department of Taxation PO Box 530 Columbus, OH 43216-0530

Synchrony Bank Bankruptcy Department PO Box 965060 Orlando, FL 32896

Transworld Systems 507 Prudential Road Horsham, PA 19044

Universal Dermatology 425 Metro Place North Suite 195 Dublin, OH 43017

Webbank/Fingerhut PO Box 81607 Austin, TX 78708

Weltman Weinberg & Reis 3705 Marlane Drive Grove City, OH 43123